

NAME OF ASSOCIATION _____

FOR OFFICE USE ONLY

ARCHITECTURAL COMMITTEE (AC) IMPROVEMENT REQUEST

Date Received _____

Critical Date _____

Date Sent to AC _____

Date Received From AC _____

Rep _____

***THE COLORADO PROPERTY
MANAGEMENT GROUP, INC.***

2620 S. Parker Rd., Suite 105
Aurora, CO 80014
303-671-6402 Fax: 303-671-6430

Name: _____

Address _____ Home Phone: _____

City _____ State: _____ Zip _____ Work Phone: _____

Mailing address if different than proposed improvement(s) _____

My request involves the following type of improvement:

- Painting Deck/Patio Slab Roofing Drive/Walk Addition
- Landscaping Patio Cover Room Addition Basketball Backboard
- Fencing Other _____

Describe improvements (include paint chips, building materials, landscape plans, fence layout, and other plans or brochures for patios, decks, structures, or sheds.) _____

Planned Completion Date: _____

I understand that I must receive approval of the Architectural Committee in order to proceed. I understand that AC approval does not constitute approval of the local building department and that I may be required to obtain a building permit. I agree to get any permits that may be required for this improvement from the City, County, and/or State before construction begins. I agree to complete improvements promptly after receiving approval. I understand that I shall maintain proper drainage away from my foundation and not impede proper drainage swales on my lot when installing landscape or building improvements. Upon the completion of my improvement, I hereby authorize the Architectural Committee and The Colorado Property Management Group to enter onto my property for exterior inspection at a mutually agreed upon time.

Date _____ Homeowner's Signature _____

THIS APPROVAL DOES NOT APPLY TO DRAINAGE FROM YOUR LOT OR NEIGHBORING LOTS. CAREFUL STUDY PERTAINING TO THE PROPER DRAINAGE OF BOTH IRRIGATION AND STORM DRAINAGE SHOULD BE MADE OF YOUR LOT AND YOUR NEIGHBOR'S LOTS BY QUALIFIED INDIVIDUALS.

AC Action:

- Approved as Submitted.
- Approved subject to the following requirements: _____

Disapproved: _____

Architectural Committee Member _____ Date _____

White - AC Signed Homeowner Copy Yellow - Manager Copy Pink - AC Copy